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# JESSE KREMER

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STATE REPRESENTATIVE • 59<sup>TH</sup> ASSEMBLY DISTRICT

**Senate Committee on Health and Human Services**

**Senate Bill 179**

**Assembly Committee on Health**

**Assembly Bill 237**

**June 2, 2015**

Committee Chairs, members of the Senate and Assembly Committees; thank you for being here today to hear testimony on SB 179/AB 237, the Pain Capable Unborn Child Protection Act. I am thankful for the opportunity to testify before you today.

Recent scientific research has demonstrated that unborn babies can feel pain as early as 20 weeks, or five months, after conception. This bill seeks to protect these babies who are capable of feeling pain from the torture of late term abortion procedures.

Evidence shows that when a child is subjected to painful stimuli in the womb, chemical changes occur independent of the mother. Endorphin levels rise, cortisone levels fluctuate and the child thrashes around. Similarly, when a perfectly healthy baby and one with Hydranencephaly, no cerebral cortex, are placed side by side and subjected to painful stimuli - such as a pinch on the bottom of the foot - both will react to the pain in the same fashion.

In addition to establishing a threshold after which painful abortions can no longer be performed, this bill adds additional reporting requirements for hospitals and clinics, as well mandates that additional new information on perinatal hospice options be provided to the mother.

Current law requires facilities that perform abortions to report socioeconomic and geographic data annually to the Department of Health Services (DHS). This bill requires the additional reporting of the probable postfertilization age of the child for purposes of determining pain capability. If the child is found to be capable of experiencing pain, the report must also contain the nature of the medical emergency that necessitated the abortion, along with a statement certifying that the method of abortion provided the best possible opportunity for the child to survive. The bill also requires a doctor to inform the mother seeking an abortion of the numerical odds of survival if the child were to be delivered at that gestational stage.

The Pain Capable Unborn Child Protection Act will also require the oral and written provision of information on perinatal hospice to a mother considering abortion. Sadly, some mothers who receive a fetal abnormality prognosis are often directed towards abortion as their only real option. Many are unaware of their options should they decide to carry their child to term. Perinatal hospice is a support network of specially trained psychologists, doctors and clergy who provide physical and emotional help to the mother, father and terminally ill child from the initial diagnosis until natural death occurs.

Today you will hear a variety of testimony addressing scientific documentation on both sides of this issue; but first, let me ask one simple question; if there is *any* chance that a five month old baby who is dismembered in the womb can feel pain...will you be content to sit idly by?

Wisconsinites have long since abandoned the death penalty on the grounds of cruel and unusual punishment. This bill would mark another such positive step for the moral and ethical direction of our state and ensure that



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citizens of Wisconsin do not have to tolerate the scientifically proven, brutal and painful killing of our innocents. I implore each of you today to join us in support of this legislation.